## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

10235507

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY	
TOTAL CLAIMS			25					RATE	FEE	7	RATE	FEE
F	OR		NUMBER FILED		NUM	BER EXTRA		BASIC FEE	385.00	OR	BASIC FEE	770.00
TO	OTAL CHARGE	ABLE CLAIMS	40 minus 20=		*	20		X\$ 9=		OR	X\$18=	360
INI	DEPENDENT C	LAIMS	ر ک minus 3 =		* '	Ø		X43=		OR	X86=	300
М	JLTIPLE DEPE	NDENT CLAIM P	RESENT					+145=		OR	+290=	290
* If the difference in column 1 is less than zero, enter "0" in column 2								TOTAL		OR	TOTAL	1420
CLAIMS AS AMENDED - PART II										<b>J</b> 0	OTHER	
	•	(Column 1)	<del>,</del>	(Colum		(Column 3)		SMALL	ENTITY	OR	SMALL	ENTITY
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIO PAID F	BER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
S S S	Total	*	Minus	**		.=		X\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	***		=		X43=		OR	X86=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+145=		OR	+290=	
							L	TOTAL		┨┈╏	TOTAL	
	·	(Column 1)		(Colum	ın 2\	(Column 3)	Δ	NDDIT. FEE		10	ADDIT. FEE	
8		CLAIMS		HIGHE	ST		Г		ADDI-	1 [		ADDI-
AMENDMENT		REMAINING AFTER AMENDMENT		NUMB PREVIOU PAID F	USLY	PRESENT EXTRA		RATE	TIONAL FEE		RATE	TIONAL
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=		X43=.		OR	X86=	
	FIRST PRESE	NTATION OF ML	JLTIPLE DEF	PENDENT	CLAIM			+145=		OR	+290=	
							L	TOTAL		\ <b>L</b>	TOTAL ADDIT, FEE	
		A	DDIT. FEE <b>L</b>	· ·	, ,	WDII. FEEL						
AMENDMENT C		(Column 1) CLAIMS REMAINING AFTER AMENDMENT		(Columnia) HIGHE NUMBI PREVIOL PAID FO	ST ER JSLY	PRESENT EXTRA	ſ	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	r	X\$ 9=	,	OR	X\$18=	
	Independent	*	Minus	***		=	H	X43=			X86=	
٩	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							775=		OR	<b>∧00=</b>	
		d in lace 45 45						+145=		OR	+290=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  ***OPTION OF TOTAL ADDIT. FEE												
		ber Previously Paid					found	d in the anni	opriate box	in colu	mn 1	